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ABSTRACT

The use of adventure programming with families has increased tremendously during the past 10 years. Like traditional adventure activities, adventure interventions with families have been well received for their capacity to fully engage participants in dynamic interactions that create therapeutic movement. These activities are especially powerful as assessment tools as they invite families to enact their behavior patterns and family structure. In 1991, a survey of 44 U.S. family adventure programs identified 4 categories of intervention: recreation, enrichment, adjunctive therapy, and primary therapy. The recreation format is typically a one-shot program in which families participate together in adventure activities and leave the event with a "good" feeling. The enrichment format provides adventure activities that are topic-focused and build specific skills such as communication or trust. An enrichment program may run over several weeks to allow for integration of material learned in previous sessions. The adjunctive therapy format includes family adventure experiences used in conjunction with a primary treatment approach. Program goals address family systems issues. Often families participate in such an intervention because they have a family member in treatment. The primary therapy format uses adventure activities as the primary change agent, and activities are prescriptively tailored to address a specific family's problem. Criteria are listed for defining a primary adventure family therapy program. The importance of distinguishing among formats to provide appropriate programming is emphasized. Contains 12 references. (SV)

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Are Those Families Swinging From the Branches? Helping Families Find Solutions Through Adventure Therapy

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ABSTRACT

Practitioners working with multiproblem families often find themselves limited by the family's process. Engaging families in play can create new possibilities for the therapist and family. This workshop will introduce activities for assessment, enrichment, and therapy with families.

As families evolve in their developmental cycle, they often experience instability, especially around periods of transition. The lack of stability may foster fear and confusion, leading families to revert to past, familiar ways of functioning. Families that are unable to adjust to changing demands and shifting roles, inherent in the process of maturation, may find themselves embroiled in conflict.

This workshop is designed to give practitioners working with such families tools to help their clients to grow. Adventure activities can be a powerful method for engaging difficult families. Participants will learn to differentiate between interventions focused on assessment, enrichment, and therapy by participating in adventure activities from each category. The workshop will address different framing and debriefing techniques, as well as

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different settings, for example, family and group. The theory and historical development of adventure family therapy will also be reviewed. Participants will leave the session with a working knowledge of adventure family therapy and new ideas for assisting families in achieving a healthier level of functioning.

Adventure Family Therapy

The use of adventure programming with families has increased tremendously during the past ten years. Like traditional adventure activities, adventure interventions with families have been well received for their capacity to fully engage participants in dynamic interactions that create therapeutic movement. These activities have been especially powerful as assessment tools as they invite families to stage enactments where their behavior patterns and family structure become quickly evident. There have been a number of articles developing a theoretical foundation and practical applications for adventure family therapy. Gass (1991) outlined how adventure strategies integrate with strategic and structural approaches to family therapy. Gillis and Bonney (1989) discussed the use of adventure activities within a psychodrama format in working with a couple. Gerstein and Rudolph (1989), as well as Gillis and Bonney (1986), documented the use of strategic family approaches within an adventure curriculum. Bandoroff (1992) provided a detailed account of the theoretical basis for adventure family therapy, drawing from structural family therapy, brief therapy, and multiple-family therapy.

In 1991, some of the pioneers of adventure family therapy attempted to document the scope and practice of the use of adventure activities with families (Gillis, Gass, Bandoroff, Rudolph, Clapp, & Nadler, 1991). They surveyed 44 adventure programs throughout the U.S. that reported working with families. The results of this survey provided a descriptive view of the emerg-

ing field of adventure family therapy. Perhaps most important, the results identified four categories of intervention: 1) recreation, 2) enrichment, 3) adjunctive therapy, and 4) primary therapy. A brief description of each category is presented below.

Recreation: This format would be typified by engaging "a one-shot" family adventure program that would use a "family day" or "family hour" to complete its task in a single session. The goal for such an experience would be to have fun, allowing the family to participate together in activities and leave the event with a "good" feeling. While it might be assumed that the recreational experience would represent the least therapeutic of the formats discussed here, this may not always be the case. Regardless of the outcome, the true goal of this approach, however, is not therapeutic in nature but recreational. Generally steps are not taken to frame activities with metaphors related to a particular family issue. Whatever therapeutic benefits might occur would be related simply to the family's participation in the adventure activities (Gillis, Gass, Bandoroff, Clapp, & Nadler, 1991).

Enrichment: This format would be characterized by structured sections that intentionally address common family issues. The goal would be to provide topic-focused, skill-building sessions (e.g., communication, trust, negotiation) employing adventure activities. The activities would be specifically related to the skill being taught rather than tailored to a particular family's issue. The families in an enrichment experience choose the intervention, to improve their family functioning. The program may run over several weeks allowing for integration of the material learned in previous sessions. A good example of the enrichment format is the first part of The Family Challenge (Clapp & Rudolph, 1990). This program employed didactic and experiential

methods to teach communication and trust to adoptive families (Gillis et al., 1991).

Adjunctive therapy: This format would include family adventure experiences used in conjunction with a primary treatment approach. Primary treatment might be an individual inpatient, an extended wilderness program, or family therapy in an office setting. The goal of this approach is to address family systems issues. Often, families are involved in such an intervention because they have a family member in treatment. A benefit of this format is its ability to shift the focus from the identified patient to the family in an engaging and impactful manner. The interventions in an adjunctive therapy format are planned to parallel treatment goals of a larger program or primary treatment approach. An example of this format is The Family Wheel Program (Bandoroff & Scherer, 1992). After their problem adolescents completed a 21-day wilderness program, parents joined their teens in the wilderness for a four-day intensive family experience. Gillis and Simpson (1991) also utilized adventure activities in their family weekends at a residential center for chemically dependent youth (Gillis et al., 1991).

Primary therapy: This format would be best identified by the use of an adventure activity or sequence of activities as the primary change agent. Another important characteristic would be that the activities are prescriptively tailored to address a specific family's problem. It is possible to incorporate this type of intervention in a traditional office setting, or it might be staged outside and/or on a low element challenge course. In a multiple-family therapy setting, the intensity and specificity of this intervention would likely require a one-to-one, therapist-to-family ratio, and the families would need to share a very similar problem. The following criteria are suggested for defining a primary adventure family therapy program (Gillis et al., 1991).

1. The goal of the therapist is to make a lasting systems change in the family using adventure activities as a primary therapeutic modality.

2. The level of assessment completed prior to the adventure family therapy experience attempts to narrow the focus to specific family issues.

3. The framing used in presenting a naturally isomorphic adventure activity is therapeutically intense (Gass, 1991b).

4. The sequencing of isomorphic activities by the therapist is focused in an effort to achieve lasting systems change in the family.

5. The debriefing is used by the adventure family therapist to punctuate the metaphor or to reframe inappropriate interpretations of the experience (Gass, 1991b).

An example of a therapist attempting to achieve the level of intensity and specificity described here while maintaining the adventure intervention as the primary therapeutic modality can be found in Gass (1991a). Due to the brief history of adventure family therapy and the sophisticated nature of this intervention, the primary therapy format may be more a goal than a reality at this point (Gillis et al., 1991).

These formats provide a framework for conceptualizing adventure family therapy interventions. However, like most models, when applied in the field, theoretical distinctions tend to become blurred. This is only a road map to assist practitioners in understanding what it is that they are doing and in establishing clear and realistic goals for their interventions. Ringer and Gillis (1995) highlighted the utility of such distinctions in their article about managing psychological depth when processing adventure experiences. Being clear about the purpose of the intervention is necessary for practitioners to operate ethically and to provide an experience that is congruent with the services for which the client has "contracted." Managing psychological depth is especially important with families, who are often marked by volatility, and where the

presence of significant others may compromise an individual family member's confidentiality. Practitioners with a clear sense of the purpose of the experience are better able to avoid being drawn into issues that they have neither the time nor expertise to adequately address.

Being a relatively new field, research on the use of adventure programming with families remains preliminary. After a review of the studies and descriptive articles in the literature, Gillis and Gass (1993) concluded that the outcomes of adventure family therapy programs demonstrate promise for treating alcoholic families and families of problem adolescents. They suggested that more studies, using traditional systemic assessment measures, are needed to demonstrate the efficacy of adventure therapy with families.

Summary

The field of mental health has increasingly come to recognize the importance of the family system in creating lasting change. During the past decade, the family has become the target of many therapeutic interventions. In the therapeutic adventure field, this zeitgeist has led to the establishment of adventure family therapy. The adaptation of adventure activities for use with families has provided a powerful tool for the assessment and treatment of families. Interventions within the domain of adventure family therapy seem to fall into four categories: recreation, enrichment, adjunctive therapy, and primary therapy. Distinguishing between these formats is useful in planning purposeful interventions, and necessary to provide ethical treatment to families. The primary therapy format requires that adventure activities be the primary therapeutic modality and be employed toward the goal of achieving lasting change. This presents practitioners with a challenge to develop strategies and techniques to realize the potential of this promising intervention.

Early outcomes appear promising and more research is strongly encouraged. Further study and training in adventure family therapy should yield advances in the theory and application of this exciting modality for the treatment of families.

REFERENCES

Bandoroff, S. (1991). Wilderness family therapy: An innovative treatment approach for problem youth. (Doctoral dissertation, University of South Carolina, 1991). *Dissertation Abstracts International.*

Bandoroff, S., & Scherer, D. (1994). Wilderness family therapy: An innovative treatment approach for problem youth, *Journal of Child & Family Studies, 3*(2), 175–191.

Clapp, C., & Rudolph, S. (1990). The Family Challenge Program. In R. Flor (Ed.), *Proceedings Journal of the 18th Annual Conference.* Boulder, CO: Association for Experiential Education, pp. 71–73.

Gass, M. A. (1991a). Adventure therapy for families. In M.A. Gass (Ed.), *Therapeutic applications of adventure.* Boulder, CO: Association for Experiential Education.

Gass, M. A. (1991b). Enhancing metaphor development in adventure therapy programs. *Journal of Experiential Education, 14*(2), 6–13.

Gerstein, J., & Rudolph, S. (1989). *Taking a family adventure programming one step further: Utilizing a strategic perspective.* Paper presented at the Association for Experiential Education, Santa Fe, New Mexico.

Gillis, H. L., & Bonney, W. C. (1986). Group counseling with couples or families: Adding adventure activities. *Journal for Specialists in Group Work, 11*(4), 213–219.

Gillis, H. L., & Bonney, W. C. (1989). Utilizing adventure activities with intact groups: A sociodramatic systems approach to consultation. *Journal of Mental Health. Counseling, 11*(4), 345–358.

Gillis, H. L., & Gass, M. (1993). Bringing adventure into marriage and family therapy, An innovative experiential approach. *Journal of Marital and Family Therapy, 19*(3), 273–286.

Gillis, H., Gass, M., Bandoroff, S., Clapp, C., & Nadler, R. (1991). Family adventure survey: Results and discussion. In C. Birmingham (Ed.), *Proceedings Journal of the 19th Annual Association for Experiential Education Conference*, pp. 29–39.

Gillis, H. L., & Simpson, C. (1991). Project Choices: Adventure–based residential drug treatment for court referred youth. *Journal of Addictions and Offender Counseling, 12*(1), 12–27.

Ringer, M., & Gillis, H. L. (1995). Managing psychological depth in adventure programming. *Journal of Experiential Education, 18*(1), 41–51.